

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: J. M. Canich  
 Serial No.: 07/676,690  
 Filed: March 3, 1991  
 For: OLEFIN POLYMERIZATION CATALYSTS  
 Group Art Unit: 150  
 Art Unit: 1505  
 Examiner: David Wu

RECEIVED

JUN 8 1992  
 GROUP 150  
*Linda B.*

New York, New York

Hon. Commissioner of Patents  
 and Trademarks  
 Washington, D.C. 20231

POWER TO INSPECT AND MAKE COPIES

Sir:

Please permit Ms. Pat Paxton, or her duly authorized representative, to inspect the file of the above-identified patent application and to make copies of any papers in the file.

Respectfully submitted,

*Donald L. Rhoads*

Donald L. Rhoads  
 Registration No. 34,705

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*Approved  
 E A Pollard  
 06/08/92*

Modified PTO 1083  
For Other Than A Small Entity

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GROUP 150

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TRANSMITTAL LETTER

Sir:

Transmitted herewith: [ ] a Preliminary Amendment; [ ] a Response to Examiner's Action; [ ] a Supplemental Amendment; [ ] a substitute Specification; [ ] a Declaration; [ ] a Supplemental Declaration; [X] a Power of Attorney; [ ] an Associate Power of Attorney; [ ] formal drawings; to be filed in the above-identified patent application; [ ] Supplemental Information Disclosure Statement; [X] a Power of Inspection.

FEE FOR ADDITIONAL CLAIMS

[ ] A fee for additional claims is not required.

[ ] A fee for additional claims is required. The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	-	*	=	x \$20	= \$
INDEPENDENT CLAIMS	-	**	=	x \$72	= \$
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+ \$220	= \$

\* If less than 20, insert 20.

\*\* If less than 3, insert 3.

TOTAL \$ \_\_\_\_\_

- ☐ A check in the amount of \$\_\_\_\_\_ in payment of the fee for additional claims is transmitted herewith.
- ☐ The Commissioner is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.16 in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge \$\_\_\_\_\_ to Deposit Account No. 06-1075 in payment of the fee for additional claims. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

- ☐ The following extension is applicable to the Response filed herewith; ☐ \$110.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.17(a); ☐ \$350.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.17(b); ☐ \$810.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.17(c); ☐ \$1,280.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.17(d).
- ☐ A check in the amount of ☐ \$110.00; ☐ \$350.00; ☐ \$810.00; ☐ \$1,280.00; in payment of the extension fee is transmitted herewith.
- ☐ The Commissioner is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge the ☐ \$110.00; ☐ \$350.00; ☐ \$810.00; ☐ \$1,280.00; extension fee to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.



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